

STATE OF MAINE RADIATION CONTROL PROGRAM RECIPROCITY REPORTING FORM

NAME OF LICENSEE:					STA	LICENSE NUMBER: STATE: EXPIRATION DATE:			
ADDRESS OF LICENSEE:					TY	TYPE OF REPORT			
						INITIAL			
						REVISION			
						CLARIFICAT	ION		
RSO/CONTACT:			ELEPHONE:		F	AX:			
E-MAIL:									
	ACTIVITI	ES	TO BE CONDUCT	ED IN T	HE STA	TE			
PORTABLE GAUG	PORTABLE GAUGES RADIOGRAPHY				LEAK TESTING AND/OR CALIBRATION				
TELETHERAPY/IR SERVICE	RRADIATOR		OTHER:(speci	fy)	1				
PLACE WHERE WORK WILL BE DONE									
LOCATION		PE	OPLE DOING WO	RK IS	OTOPE	E/ACTIVITY	DATES/T W	IMES OF ORK	
CLIENT & SPECIFIC	C LOCATION:								
CLIENT CONTACT &	S DHONE.								
CLIENT CONTACT C	XTTIONE.								
CLIENT & SPECIFIC LOCATION:									
CLIENT & OF LOW IN	200/11011.								
CLIENT CONTACT & PHONE:									
Send this report so i Program, 11 State I (207) 287-3059. Thi	House Station, Aug	gus In th	ta, Maine 04333 ne Web: <u>www.ma</u>	-0011. aineradia	Call (2 ationco	07) 287-5676 introl.org	with any		
Reporting Official:				Telephone:				Date	
Agency Use	Authorizing Official:			Signature:				Date	

The Department of Health and Human Services (DHHS) does not discriminate on the basis of disability, race, color, creed, gender, age, or national origin, in admission to, access to or operations of its programs, services, or activities or its hiring or employment practices. This notice is provided as required by Title II of the Americans with Disabilities Act of 1990 and in accordance with the Civil Rights Acts of 1964 as amended, Section 504 of the Rehabilitation Act of 1973 as amended, the Age Discrimination Act of 1975, Title IX of the Education Amendments of 1972 and the Maine Human Rights Act. Questions, concerns, complaints, or requests for additional information regarding the ADA may be forwarded to the DHHS' ADA Compliance/EEO Coordinator, State House Station #11, Augusta, Maine 04333, 207-287-4289 (V) or 207-287 3488 (V), TTY: 800-606-0215. Individuals who need auxiliary aids for effective communication in programs and services of DHHS are invited to make their needs and preferences known to the ADA Compliance/EEO Coordinator. This notice is available in alternate formats, upon request.